Annual Meeting of The Maryland Association of Healthcare Quality

Involving Patients in their own care as a Patient Safety Strategy

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Where we will be going today

**Start at** describing patients’ expectations of caregivers in the delivery of safer healthcare

**Watch for a series of national and international efforts** that promote **substantial progress toward the ultimate goal of totally safe patient care**

**Turn Right**

summarizing what one patient expects, if something should go wrong
Perfection IS NOT Impossible!
Please remember that I am a 7 year-old person and not just a patient.

Please Knock on the door and wait for me to say ‘come in’.

Please call my mom, Sally.

Please say what you are here to do.

Please do not touch my belly.

Please do not stand in front of the TV.
Doctor's Order Killed Cancer Patient
Don Berwick, M.D.,
CEO, Institute for Healthcare Improvement
National Patient Safety Goal 13

 feu Encourage patients’ active role in their own care as a patient safety strategy.

 Requirement: Define and communicate the means for patients and their families to report concerns about safety and encourage them to do so.

 The Joint Commission
What Patients Expect from the Health Care System 100 Percent of the Time

», To be listened to, taken seriously, and respected as a care partner
 » To have my family/caregivers treated the same
 » To participate in decision making AT THE LEVEL I CHOOSE
», To be always told the truth
 » To have things explained to me fully and clearly
 » To receive an explanation and apology if things go wrong
», To have information communicated TO ALL MY CARE TEAM
 » To have my care documented promptly and accurately
 » To have these records made available to me if requested
», To have coordination among all members of the health care team across settings.
», To be supported EMOTIONALLY as well as physically
», To receive high-quality, SAFE CARE

Source: Jim Conway, Institute for Healthcare Improvement “Reflections of Patient and Family Voices”, December, 2005
The Seven Percent Solution

- Listen attentively and respectfully to a patient’s complaint. Define the extent of the complaint.
- Express your sincere apology for the suffering experienced by the patient. No need to accept any blame.
- Promise to investigate the problem and do so energetically. Ascertain the cause of the problem.
- Promise to report the results of your investigation. Do so in an understandable fashion.

- Report to the patient the steps you have taken or plan to undertake to prevent a reoccurrence of their problem.
- Apologize sincerely for actions that may have contributed to the problem by you or your staff.
- Offer to do whatever is necessary to make the patient “whole” once more, if possible and appropriate. If further discussion or medication is required to achieve agreement, advise the patient that you are open to their having an advocate join in the discussion.

Bill Wright
December, 2003
Tools for Totally Safe Healthcare
SPEAK UP

✓ Speak up if you have questions or concerns, it’s your right to know.
✓ Pay attention to the care you are receiving.
✓ Educate yourself about your diagnosis, test and treatment.
✓ Ask a trusted family member or friend to be your advocate.
✓ Know what medications you take and why you are taking them.
✓ Use a health-care provider that rigorously evaluates itself against safety standards.
✓ Participate in all decision about your care.

Joint Commission
Know Your Rights

- You have the right to be informed about the care you will receive.
- You have the right to get information about your care in your language.
- You have the right to make decisions about your care, including refusing care.
- You have the right to know the names of the caregivers who treat you.
- You have the right to safe care.
- You have the right to have your pain treated.
- You have the right to know when something goes wrong with your care.
- You have the right to get an up-to-date list of all your current medications.
- You have the right to be listened to.
- You have the right to be treated with courtesy and respect.

SpeakUP Know Your Rights by The Joint Commission
Centers for Medicare and Medicaid Services

- Beginning October 1, 2007, report secondary diagnosis present on admission
- Beginning October 1, 2008, payment will be withheld for costs incurred from the list of preventable errors established by CMS
- \{13 \textit{Never Should Happen Events}\}
- Part of Deficit Reduction Act of 2005 \{DRA\}
- Private insurers are monitoring situation and considering making compliance a contractual obligation

\textit{SOM Transmittal 109}
13 Never Should Happen Events

- Catheter related urinary tract infection
- Bed Sores
- Objects left in after surgery
- Air embolism in blood stream after injection
- Patient’s given incompatible blood type
- Bloodstream staph infections
- Ventilator-Associated Pneumonia
- Vascular-catheter-associated infections
- Clostridium Difficile-associated disease {gastrointestinal infections}
- Drug-resistant staph infections
- Surgical site infections
- Wrong surgery
- Falls

“Feds to Stop Paying for Medical Errors”
National Quality Forum

- Creating and sustaining a culture of safety;
- Informed Consent, Honoring Patients Wishes and Disclosure;
- Matching Healthcare Needs with Service Delivery Capability;
- Information Management and Continuity of Care;
- Medication Management;
- Prevention of Healthcare-associated Infections; and
- Condition and Site-Specific Practices.

NQF Safe Practices 2006 Update
• What is the test for?
• How many times have you done this?
• When will I get the results?
• Why do I need this surgery?
• Are there any alternatives to surgery?

• What are the possible complications?
• Which hospital is best for my needs?
• How do you spell the name of that drug?
• Are there any side effects?
• Will this medicine interact with medicines I’m already taking?

www.ahrq.gov/questionsaretheanswer
PROTECTING 5 Million lives FROM HARM

Institute for Healthcare Improvement

IHI.org
Steps to be taken whenever a serious reportable adverse event occurs in a facility:

1) Apologize to the patient and family affected.
2) Report the event to at least one reporting program.
3) Conduct a Root Cause Analysis; and
4) Waive all costs directly related to the event and refrain from seeking payment from patient or third-party payer.
Coming Soon

Institute for Health Care Reform
The WHO ‘London Declaration’
{November, 2005}

Worldwide Patient Safety Solutions
{Jointly with The Joint Commission and Joint Commission International}
WE, Patients for Patient Safety, will be the voice for all people, but especially those who are now unheard. Together as partners, we will collaborate in:

**Developing and Driving a constructive dialogue with all partners concerned with patient safety.**

In honor of those who have died, our loved ones today, and the world’s children yet to be born, we will strive for excellence. So that all involved in healthcare are as safe as possible as soon as possible. This is our pledge of partnership.

**WHO London Declaration**, November 30, 2005
“Consumers can take action to be part of the safety net, the greater the involvement of the patient the better the outcome.”

Susan Sheridan,
President and co-founder of Consumers Advancing Patient Safety {CAPS}
harmonization
Join the Quality Choir

http://www.safetyleaders.org/content_page2.jsp?ID=2575
Too Soon Old

What do you see nurses? . . . What do you see?  
What are you thinking . . . when you’re looking at me?  
A crabby old man, . . . not very wise,  
Uncertain of habit . . . with faraway eyes?  
Who dribbles his food . . . and makes no reply.  
When you say in a loud voice . . . “I do wish you’d try!”  
Who seems not to notice . . . the things that you do.  
And forever is losing . . . a sock or shoe?  
Who, resisting or not . . . lets you do as you will,  
With bathing and feeding . . . The long day to fill?  

Is that what you’re thinking? Is that what you see?  
Then open your eyes, nurse . . . you’re looking at me.  
I’ll tell you who I am . . . as I sit here so still  
As I do your bidding . . . as I eat at your will.  
I’m a small child of Ten . . . with a father and mother,  
Brothers and sisters . . . who love one another.
A young boy of Sixteen . . . with wings on his feet
Dreaming that soon now . . . a lover he’ll meet.
A groom soon at Twenty . . . my heart gives a leap.
Remembering, the vows . . . that I promised to keep.
At Twenty-Five, now . . . I have young of my own.
Who need me to guide . . . and a secure happy home.
A man of Thirty . . . my young now grown fast,
Bound to each other . . . with ties that should last.
At Forty, my young sons . . . have grown and are gone,
But my woman’s beside me . . . to see I don’t mourn.
At Fifty, once more, . . . babies play ‘round my knee,
Again, we know children . . . my loved one and me.

Dark days are upon me . . . my wife now is dead
I look at the future . . . I shudder with dread.
For my young are all rearing . . . young of their own.
And I think of the years . . . and the love that I’ve known.
I’m now an old man . . . and nature is cruel.
Tis jest to make old age . . . look like a fool.
The body, it crumbles . . . grace and vigor, depart.
There is now a stone . . . where I once had a heart.

But inside this old carcass . . . a young guy still dwells,
And now and again . . . my battered heart swells.
I remember the joys . . . I remember the pain.
And I’m loving and living . . . life over again.

I think of the years . . . all too few . . . gone too fast.
And accept the stark fact . . . that nothing can last.
So open your eyes, people . . . open and see.
Not a crabby old man. Look closer . . . see . . . ME!!

David L. Griffith
QUIZ

1) What’s the most important thing to bring with you to the doctor’s office?
   A) A properly completed living will, to be kept on file
   B) Your husband or wife
   C) A crisp $50 bill in an envelope
   D) An accurate and complete health profile.
   E) A photo of yourself at age twelve

2) When giving your doctor your family history, which tidbit below would be most critical to mention?
   A) My uncle had asbestosis and needed oxygen when he was 70.
   B) My mother is so healthy she beats up the neighbors
   C) My husband smokes.
   D) My father is becoming forgetful now that he is 88
   E) My brother is a 440-pound diabetic
3) Your doctor says you need to undergo a medical test. Which question should you definitely ask first?
A) How accurate is this test?
B) What exactly does this test measure?
C) Who is going to pay for this?
D) Why do I need the test, and what’ll happen if I don’t take it?
E) Will the probe that’s used in this test be brand new?

4) Which of the following is the LEAST important quality in finding a great hospital?
A) It should be close enough to your home area so friends can visit, which is important for my morale.
B) It should be able to prove that it performs high numbers of the procedure that you need done
C) The hospital should have high marks for quality in state databases
D) The emergency room should have a policy of not charging anyone who comes in on his birthday
E) The hospital’s managerial staff should all be practicing, board-certified doctors
References


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